Colorado Department of Public Health and Environment



Medical Marijuana Registry

The Medical Marijuana Registry supports Colorado citizens' medical care needs by administering a statewide program for legal access to medical marijuana.

Policy and Procedures Update June 2013

On August 1, 2013, the Registry will be releasing new forms. This *Policy and Procedures Update* provides an overview of recent changes at the Registry to increase efficiency in managing patient records and processing paperwork. For questions or comments, please contact us at 303-692-2184 or medical.marijuana@state.co.us.

New Forms Released August 1, 2013

Please begin using the new forms immediately. The Registry will provide a 90-day grace period for forms already in process.

REVISIONS TO EXISTING FORMS:

- Application and Change of Patient Records forms.

 Instructions have been modified and the format restructured to incorporate form #MMR1012 Caregiver Acknowledgment. In order to designate a caregiver, patients must include this form with their application or Change of Patient Record form.
- <u>Physician Certification</u>. Etiology is now required for any designation of cachexia, severe nausea, seizures, persistent muscle spasms or severe pain. If etiology is not included, the physician certification will be rejected.

NEW FORMS:

- MMR1012 Caregiver Acknowledgment. Caregivers must complete this form to acknowledge they are assuming significant responsibility for managing the patient's well-being. If a caregiver has five or more patients currently, the patient must also complete optional Section C: Patient Limit Waiver.
- MMR1013 Provider Information Update. Medical Marijuana Centers and Caregivers may submit this form to update contact information in the Registry's database. Changes of provider information are reflected in the patient records, but replacement cards are not issued.
- MMR1014 Provider Signature Revocation. Provider data, such as name and contact information for physicians and caregivers, is recorded as part of the patient's electronic record. By submitting this form, a physician or caregiver acknowledges that he/she is no longer providing medical or caretaking support to the patient. The provider's name and contact information is removed from the patient's current electronic record. Historical data is maintained in accordance with federal and state retention requirements. Patients are notified when a physician or caregiver has revoked his/her signature, and given opportunity to secure a new provider.

OBSOLETE FORM:

• MMR1009 Caregiver's Patient Limit Waiver. With the introduction of MMR1012 Caregiver Acknowledgement, the Registry will no longer be using this form to approve caregivers with more than five patients.

Tax-exempt Qualifications Updated

Tax-exempt status allows patients to apply for a Medical Marijuana Registry card without paying the application fee. It also allows patients to purchase medical marijuana without paying Colorado sales taxes. To request tax exemption, patients must submit form #MMR1010 Request for Fee Waiver/Tax Exempt Status and a certified copy of their most recent Colorado tax return. Patients may qualify for a fee waiver if their household income is 185% of the Federal Poverty Level or less. The chart below indicates the annual household incomes, adjusted for family size, that qualify.

Household incomes at 185% of 2013 Federal Poverty Guidelines*

# in Family	Annual Income
1	\$ 21,257
2	\$ 28,694
3	\$ 36,130
4	\$ 43,567
5	\$ 51,005
6	\$ 58,442
7	\$ 65,879
8	\$ 73,316
Each additional	\$ 7,437

Source: Federal Register, Vol. 78, No. 16, January 24, 2013, pp. 5182-5183. Poverty guidelines are updated periodically in the Federal Register by the U.S. Department of Health and Human Services under the authority of 42 U.S.C. 9902(2)

Due to law changes effective January 1, 2012, **the Registry** can only accept a certified copy of a Colorado tax return as proof of income. According to the Department of Revenue, anyone may file taxes even if not required to do so based on income.

Unallocated Application Fees

The Registry receives a significant number of checks and money orders that do not have the patient's full name clearly identified. If submitting money orders or checks from an account not in the patient's name, please write the patient's full name and date of birth on the form of payment.

Medical Marijuana Registry, 4300 Cherry Creek Drive South, Denver, CO 80246 Phone: 303-692-2184 ● Fax: 303-758-5182 ● Email: medical.marijuana@state.co.us Website: http://www.cdphe.state.co.us/hs/Medicalmarijuana/

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Tips for Successful Submissions

- 1. <u>Type or verify readability of handwriting</u>. The vast majority of data entry challenges are due to unclear handwriting. When possible, please either complete the electronic form or verify that information is readable before submitting forms.
- 2. <u>Clearly write out complete patient address.</u> The Registry receives many cards back in return mail due to bad addresses. The address on the form should be the address to which the patient wants his/her card mailed. P.O. boxes are acceptable. Please ensure that patients spell out

street names and include apartment/unit numbers. Do not abbreviate words like 'County Road' to 'CR.' To avoid breaches of confidential information, the Registry keys data from applications just as it is written on the form.

- 3. Submit ONLY ONE application or form per envelope. Recently, the Registry has seen an increase in mail from Medical Marijuana Centers containing more than one patient record. Per application instructions, "Application packets must be sent separately. Only one application packet and check/ money order per envelope." All mail containing paperwork for more than one patient is rejected. The certified mail numbers assigned to these mail pieces are invalid as proof for purchase.
- 4. <u>Provide patients with current, complete forms</u>. Please be sure that patients receive a copy of all paperwork, including the instruction pages. The Registry receives multiple calls from patients whose paperwork was rejected because they did not have a copy of the instructions for submission and missed required elements.
- 5. <u>Verify all information with patients</u>. A significant number of rejections are due to application data errors. When completing paperwork with patients, please read information aloud to verify patient understands and confirms the information before signing. One of the most common errors is that the social security number on forms does not match the number in our database.
- 6. <u>Use standard notary protocol.</u> Many patients submit copies of paperwork, rather than the originals. When notary seals are stamped in colors other than black, they often do not copy well. The Registry is then required to make further inquiry to verify the validity of the seal. In addition, it appears some forms are being pre-notarized. All forms must be signed and dated in front of the notary. A common reason for rejection is that the patient's date of signature does not match the notary's signature date.
- 7. Provide clear, complete, and easily read copies of Photo ID. Many applications are rejected because the copy of the patient's ID are too blurry or too dark to read. The Registry prefers a clear black and white copy of the ID that displays the photo, the date of birth, license number, expiration date, and patient's name in a manner that is easily scanned. For best results enlarge the ID by 150% and lighten the background a couple of degrees. Color copies are not required.
- 8. <u>Use ball-point pens rather than gel pens to ensure scan quality.</u> When faxing or scanning documents for submission to the Registry, we have discovered that paperwork completed with gel pens does not come across clearly. This has resulted in the rejection of some patient's paperwork. Please use dark colors (black, blue) and with a solid ink stream such as provided through ball-point pens.
- 9. **Do not send original identity or proof of residence documents.** Please be sure patients send a copy of their certified documents that prove identity or residency. Occasionally, the Registry receives original marriage licenses, divorce decrees, and even drivers' licenses. Sometimes, it is difficult to differentiate between a copy and the original.

Purchasing Guidelines for Centers

The Registry has recently received several calls from medical marijuana centers inquiring about the ability to sell product to patients who do not have their Registration Card with them. We have verified with the Medical Marijuana Enforcement Division that the law requires patients to have a valid photo ID and their Registration Card for all purchases. **Copies of the card cannot be used as proof of active registration.** The only exception is for new patients who may use their proof-of-mailing receipt, photo ID and a copy of their complete application packet for 35 days from the date of mailing. If a new patient receives a rejection to their paperwork, and must submit corrections, **the 35-day purchasing timeline is not extended**.

Submission of corrections by fax or e-mail

To speed the application process, patients who have non-monetary corrections may fax or e-mail their supplemental paperwork to the Registry. Instructions for correction submissions are included in the rejection letter. Centers and physicians who identify corrections after the patient has left their establishment may submit corrections to medical.marijuana@state.co.us or fax to 303-758-5182. Please be sure all corrections include the patient's full name, date of birth, and last four digits of the social security number. The Registry does not accept any other form or original submissions of applications by fax or e-mail.

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